



ANNUAL STATEMENT
For the Year Ending December 31, 2005
OF THE CONDITION AND AFFAIRS OF THE
Preferred Health Partnership of Tennessee, Inc.

NAIC Group Code	1253 (Current Period)	1253 (Prior Period)	NAIC Company Code	95749	Employer's ID Number	62-1546662
Organized under the Laws of	Tennessee		State of Domicile or Port of Entry	Tennessee		
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health[] Dental Service Corporation[] Other[] Property/Casualty[] Vision Service Corporation[] Is HMO Federally Qualified? Yes[X] No[] N/A[] Hospital, Medical & Dental Service or Indemnity[] Health Maintenance Organization[X]					
Incorporated/Organized	01/01/1994		Commenced Business	01/01/1994		
Statutory Home Office	1420 Centerpoint Blvd. (Street and Number)		Knoxville, TN 37932 (City, or Town, State and Zip Code)			
Main Administrative Office	1420 Centerpoint Blvd. (Street and Number)		Knoxville, TN 37932 (City, or Town, State and Zip Code)	(865)670-7282 (Area Code) (Telephone Number)		
Mail Address	1420 Centerpoint Blvd. (Street and Number or P.O. Box)		Knoxville, TN 37932 (City, or Town, State and Zip Code)	(865)470-7461 (Area Code) (Telephone Number)		
Primary Location of Books and Records	1420 Centerpoint Blvd. (Street and Number)		Knoxville, TN 37932 (City, or Town, State and Zip Code)	(865)470-7470 (Area Code) (Telephone Number)		
Internet Website Address	manders1@covhlth.com (E-Mail Address)					
Statutory Statement Contact	Melissa R Anderson (Name)		(865)670-7282 (Area Code)(Telephone Number)(Extension)	(865)470-7461 (Fax Number)		
Policyowner Relations Contact	1420 Centerpoint Blvd. (Street and Number)		Knoxville, TN 37932 (City, or Town, State and Zip Code)	(865)470-7470 (Area Code) (Telephone Number)(Extension)		

OFFICERS

Name	Title
Lance K. Hunsinger	President
Jeffery S. Collake	Chief Financial Officer
Jeffery S. Collake	Secretary

OTHERS

DIRECTORS OR TRUSTEES

Kenneth Truman Creed
Michael McKay Dudley
Randolph Murphree Lowry MD
Cletus Joseph McMahon Jr. MD
David A. Nowiski
Anthony L. Spezia
Sandra L. Mathy

Thomas Rowe Bell
Daniel J. David MD
Marvin H. Eichorn
Kenneth Frederick Luckman MD
Michael Earl Mitchell MD
Francis H. Olmstead Jr.
Dean M. Turner MD

State of Tennessee
County of Knox ss

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of the said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)
Lance K. Hunsinger
(Printed Name)
President
(Title)

(Signature)
Jeffery S. Collake
(Printed Name)
Chief Financial Officer
(Title)

(Signature)
Jeffery S. Collake
(Printed Name)
Secretary
(Title)

Subscribed and sworn to before me this
16th day of March, 2006

Debra Kay Stan
(Notary Public Signature)

expires - 9-16-06




Yes[] No[X]

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03/17/2006
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Statement of Reliance

I, Jeffery S. Collake, Chief Financial Officer of Preferred Health Partnership of Tennessee, Inc., hereby affirm that the listings and summaries of data and other information prepared for, and submitted to, Mark S. Alhanti of the firm Towers Perrin, were prepared under my direction and, to the best of my knowledge and belief, are accurate and complete. This reliance is valid for work done in conjunction with the 2005 annual statement.


Jeffery S. Collake
Chief Financial Officer

Preferred Health Partnership of TN


Date